

State of Colorado Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



ECMC RECEPTION

Receive Date: 10/21/2024

Document Number: 403964919

Off-Location Flowline

The Flowline Report, Form 44, shall be submitted to register, report realignment, report removal from service, provide pre-abandonment notices, or report abandonment of Off-Location Flowlines, Flowline Systems, Produced Water Transfer Systems, or Crude Oil Transfer Lines or Systems as required by the 1100 Series Rules. The Form 44 shall also be submitted to register, report realignment, or report abandonment of Domestic Taps, and to report Grade 1 Gas Leaks from Flowlines per Rules 610 and 906.

Operator Information

ECMC Operator Number: 10699 Contact Person: Pat Dolezal
Company Name: OWN RESOURCES OPERATING LLC Phone: (970) 332-3585
Address: 305 S RIDGE STREET #6279 Email: pat.dolezal@ownresources.com
City: BRECKENRIDGE State: CO Zip: 80424
Is the Operator a Tier One member of the Utility Notification Center of Colorado (CO811) that participates in Colorado's One Call notification system? Yes [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 302994 Location Type: Well Site
Name: HERBERT-62S43W Number: 9NWSE
County: YUMA
Qtr Qtr: NWSE Section: 9 Township: 2S Range: 43W Meridian: 6
Latitude: 39.896470 Longitude: -102.191670

Description of Corrosion Protection
Description of Integrity Management Program
Description of the construction method used for public by-ways, road crossings, sensitive wildlife habitats, sensitive areas, and natural and manmade watercourses (i.e., open trench, bored and cased, or bored only), if applicable.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 464346 Flowline Type: Production Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Custody Transfer Point

Flowline Start Point Location Identification

Location ID: 304748 Location Type: Well Site []
Name: HERBERT-62S43W Number: 9NENW
County: YUMA No Location ID

Qtr Qtr: NENW Section: 9 Township: 2S Range: 43W Meridian:

Latitude: 39.903030 Longitude: -102.196530

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 3.000

Bedding Material: Native Materials Date Construction Completed: 11/01/2005

Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI:

Test Date:

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date:

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465589 Flowline Type: Production Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Custody Transfer Point

Flowline Start Point Location Identification

Location ID: 303763 Location Type: Well Site

Name: HERBERT-62S43W Number: 9NWNW

County: YUMA No Location ID

Qtr Qtr: NWNW Section: 9 Township: 2S Range: 43W Meridian: 6

Latitude: 39.902060 Longitude: -102.200060

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000

Bedding Material: Native Materials Date Construction Completed: 01/01/1999

Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI:

Test Date:

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date:

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 464348 Flowline Type: Production Line Action Type: Pre-Abandonment Notice

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Custody Transfer Point

Flowline Start Point Location Identification

Location ID: 304166 Location Type: Well Site
Name: HERBERT-62S43W Number: 9SWNE
County: YUMA No Location ID
Qtr Qtr: SWNE Section: 9 Township: 2S Range: 43W Meridian: 6
Latitude: 39.899780 Longitude: -102.190750

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 01/01/1999
Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE Pre-Abandonment Notice

Date: 11/04/2024

Pre-Abandonment 30-day Notice

- Removed per Rule 1105.d.(2)
- Abandoned In Place per Rule 1105.d.(2) Exceptions - select all that apply:
 - A. A surface owner agreement executed by a surface owner allows abandonment in place.
 - B. The line is subject to the jurisdiction of the federal government, and the relevant federal agency directs abandonment in place.
 - C. The flowline or crude oil transfer line is co-located with other active pipelines or utilities or is in a recorded right of way.
 - D. Removal of the line would cause significant damage to natural resources, including wildlife resources, topsoil, or vegetation.
 - E. The flowline or crude oil transfer line is in a restricted surface occupancy area or sensitive wildlife habitat.
 - F. The flowline or crude oil transfer line or a segment of the line crosses or is within 30 feet of a public road, railroad, bike path, public right of way, utility corridor, or active utility or pipeline crossing.
 - G. The flowline or crude oil transfer line or a segment of the line crosses or is within 30 feet of or from under a river, stream, lake, pond, reservoir, wetlands, watercourse, waterway, or spring.
 - H. The operator demonstrates and quantifies that the removal of the flowline will cause significant emissions of air pollutants.
- Abandoned In Place per Rule 1105.d.(3)

Description of Pre-Abandonment Notice:

Off location flowline will be abandoned in place per Rule 1105

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 464388 Flowline Type: Production Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Custody Transfer Point

Flowline Start Point Location Identification

Location ID: 303762 Location Type: Well Site
Name: HERBERT-62S43W Number: 9NWNE
County: YUMA No Location ID
Qtr Qtr: NWNE Section: 9 Township: 2S Range: 43W Meridian: 6
Latitude: 39.902030 Longitude: -102.190940
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 01/01/1999
Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI:
Test Date:

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date:

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 464363 Flowline Type: Production Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Custody Transfer Point

Flowline Start Point Location Identification

Location ID: 304110 Location Type: Well Site
Name: HERBERT-62S43W Number: 9SENEW
County: YUMA No Location ID
Qtr Qtr: SENW Section: 9 Township: 2S Range: 43W Meridian: 6
Latitude: 39.899860 Longitude: -102.198030
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 01/01/1999
Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI:
Test Date:

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date:

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:

OPERATOR COMMENTS AND SUBMITTAL

Comments Surface Owner Agreement will be included with verification submission

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: _____ Date: 10/21/2024 Email: pat.dolezal@ownresources.com

Print Name: Pat Dolezal Title: Regulatory Specialist

Based on the information provided herein, this Flowline Report complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: _____



Director of ECMC

Date: 11/6/2024

CONDITIONS OF APPROVAL, IF ANY LIST

COA Type

Description

| | |
|--|--|
| | |
|--|--|

ATTACHMENT LIST

Att Doc Num

Name

| | |
|-----------|-------------------------------|
| 403964919 | Form44 Submitted |
| 403964939 | OFF-LOCATION FLOWLINE GIS SHP |

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|------------------------|
| | | Stamp Upon Approval |
|--|--|------------------------|

Total: 0 comment(s)